

<div style="text-align: center; font-weight: bold; font-size: 1.2em;">CLAIMS ONLY</div>	SERIAL NO.	FILING DATE
	APPLICANT(S)	

FILING DATE

CLAIMS

	AS FILED	AFTER 1st AMENDMENT	AFTER 2nd AMENDMENT			*	*	*
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	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		1				
4		1				
5		1				
6		1				
7		1				
8		1				
9		1				
10		1				
11		1				
12		1				
13		1				
14		1				
15		1				
16		1				
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25		1				
26		1				
27		1				
28		1				
29		1				
30	1					
31		1				
32		1				
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41		1				
42		1				
43		1				
44		1				
45	1					
46		1				
47	1					
48		1				
49	1					
50		1				
TOTAL IND.		↓		↓		↓
TOTAL DEP.	←		←		←	
TOTAL CLAIMS						

	IND.	DEP.	IND.	DEP.	IND.	DEP.
51	1					
52		1				
53		1				
54		1				
55		1				
56		1				
57		1				
58		1				
59		1				
60		1				
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85		1				
86		1				
87		1				
88		1				
89		1				
90		1				
91		1				
92		1				
93		1				
94		1				
95		1				
96		1				
97		1				
98		1				
99		1				
100		1				
TOTAL IND.	7	↓		↓		↓
TOTAL DEP.	45	←		←		←
TOTAL CLAIMS	52					

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS